

House File 925 - Enrolled

PAG LIN

HOUSE FILE 925

AN ACT

RELATING TO HEALTH-RELATED ACTIVITIES AND REGULATION,
INCLUDING THE PRACTICES OF OPTOMETRY AND MORTUARY
SCIENCE, ESTABLISHMENT OF A STATE PUBLIC HEALTH
DENTAL DIRECTOR AND AN ORAL HEALTH BUREAU, DEPENDENT
ADULT ABUSE, MEMBERSHIP ON THE CHILD DEATH REVIEW
TEAM, AND IMMUNITY FOR EMERGENCY RESPONSE, AND PROVIDING
FOR THE REVISION OF FEES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

DIVISION I OPTOMETRY

Section 1. Section 154.1, Code 2007, is amended to read as follows:

154.1 OPTOMETRY == DIAGNOSTICALLY CERTIFIED LICENSED
OPTOMETRISTS == THERAPEUTICALLY CERTIFIED OPTOMETRISTS.

1. For the purpose of this subtitle the following classes
of persons shall be deemed to be engaged in the practice of
optometry:

~~1. a.~~ Persons employing any means other than the use of
drugs, medicine, or surgery for the measurement of the visual
power and visual efficiency of the human eye; persons engaged
~~in the prescribing and adapting of lenses, prisms, and contact~~
~~lenses; and persons engaged in the using or employing of~~
visual training or ocular exercise for the aid, relief, or
correction of vision.

~~2. b.~~ Persons who allow the public to use any mechanical
device for ~~such a purpose described in paragraph "a".~~

~~3. c.~~ Persons who publicly profess to be optometrists and
to assume the duties incident to ~~said the~~ profession.

~~2. certified Diagnostically certified licensed~~
optometrists may employ cycloplegics, mydriatics, and topical
anesthetics as diagnostic agents topically applied to
determine the condition of the human eye for proper optometric
practice or referral for treatment to a person licensed under
chapter 148, 150, or 150A. A diagnostically certified
licensed optometrist is an optometrist who is licensed to
practice optometry in this state and who is certified by the
board of optometry examiners to use diagnostic agents. ~~A~~
~~certified licensed optometrist shall be provided with a~~
~~distinctive certificate by the board which shall be displayed~~
~~for viewing by the patients of the optometrist.~~

3. Therapeutically certified optometrists may employ all
diagnostic and therapeutic pharmaceutical agents for the
purpose of diagnosis and treatment of conditions of the human
eye and adnexa pursuant to this ~~paragraph subsection~~,
excluding the use of injections other than to counteract an
anaphylactic reaction, and notwithstanding section 147.107,
may without charge supply any of the above pharmaceuticals to
commence a course of therapy. Therapeutically certified
optometrists may prescribe oral steroids for a period not to
exceed fourteen days without consultation with a ~~primary care~~
physician. Therapeutically certified optometrists shall not
prescribe oral Imuran or oral Methotrexate. Therapeutically
certified optometrists may be authorized, where reasonable and
appropriate, by rule of the board, to employ new diagnostic
and therapeutic pharmaceutical agents approved by the United
States food and drug administration on or after July 1, 2002,
for the diagnosis and treatment of the human eye and adnexa.
The board shall not be required to adopt rules relating to
topical pharmaceutical agents, oral antimicrobial agents, oral
antihistamines, oral antiglaucoma agents, and oral analgesic
agents. Superficial foreign bodies may be removed from the
human eye and adnexa. The therapeutic efforts of a
therapeutically certified optometrist are intended for the
purpose of examination, diagnosis, and treatment of visual
defects, abnormal conditions, and diseases of the human eye
and adnexa, for proper optometric practice or referral for
consultation or treatment to persons licensed under chapter
148, 150, or 150A. A therapeutically certified optometrist is

3 4 an optometrist who is licensed to practice optometry in this
3 5 state and who is certified by the board of optometry examiners
3 6 to use the agents and procedures authorized pursuant to this
3 7 ~~paragraph subsection. A therapeutically certified optometrist~~
3 8 ~~shall be provided with a distinctive certificate by the board~~
3 9 ~~which shall be displayed for viewing by the patients of the~~
3 10 ~~optometrist.~~

3 11 Sec. 2. Section 154.3, Code 2007, is amended to read as
3 12 follows:

3 13 154.3 LICENSE.

3 14 ~~1. Every applicant for a license to practice optometry~~
3 15 ~~shall:~~

3 16 ~~a. 1. Be a graduate of an accredited school of optometry~~
3 17 ~~and meet requirements as established by rules of the board.~~

3 18 ~~b. 2. Present an official transcript issued by an~~
3 19 ~~accredited school of optometry.~~

3 20 ~~c. 3. Pass an examination as determined by the board by~~
3 21 ~~rule.~~

3 22 ~~2. A person applying to be licensed as an optometrist~~
3 23 ~~after January 1, 1980, shall also apply to be a certified~~
3 24 ~~licensed optometrist and shall, in addition to satisfactorily~~
3 25 ~~completing all requirements for a license to practice~~
3 26 ~~optometry, satisfactorily complete a course consisting of at~~
3 27 ~~least one hundred contact hours in pharmacology and receive~~
3 28 ~~clinical training as it applies to optometry with particular~~
3 29 ~~emphasis on the topical application of diagnostic agents to~~
3 30 ~~the human eye for the purpose of examination of the human eye,~~
3 31 ~~and the diagnosis of conditions of the human eye, at an~~
3 32 ~~institution accredited by a regional or professional~~
3 33 ~~accreditation organization which is recognized or approved by~~
3 34 ~~the council on postsecondary accreditation or the United~~
3 35 ~~States office of education.~~

4 1 ~~3. A person licensed as an optometrist prior to January 1,~~
4 2 ~~1980 who applies to be a certified licensed optometrist shall~~
4 3 ~~first satisfactorily complete a course consisting of at least~~
4 4 ~~one hundred contact hours in pharmacology as it applies to~~
4 5 ~~optometry including clinical training as it applies to~~
4 6 ~~optometry with particular emphasis on the topical application~~
4 7 ~~of diagnostic agents to the human eye and possible adverse~~
4 8 ~~reactions thereto, for the purpose of examination of the human~~
4 9 ~~eye and the diagnosis of conditions of the human eye, provided~~
4 10 ~~by an institution accredited by a regional or professional~~
4 11 ~~accreditation organization which is recognized or approved by~~
4 12 ~~the council on postsecondary accreditation or the United~~
4 13 ~~States office of education, and approved by the board of~~
4 14 ~~optometry examiners.~~

4 15 ~~4. In addition to the examination required by subsection~~
4 16 ~~1, paragraph "c", a person applying to be a certified licensed~~
4 17 ~~optometrist shall also pass an examination prescribed by the~~
4 18 ~~optometry examiners in the subjects of physiology and~~
4 19 ~~pathology appropriate to the use of diagnostic pharmaceutical~~
4 20 ~~agents and diagnosis of conditions of the human eye, and~~
4 21 ~~pharmacology including systemic effects of ophthalmic~~
4 22 ~~diagnostic pharmaceutical agents and the possible adverse~~
4 23 ~~reactions thereto, authorized for use by optometrists by~~
4 24 ~~section 154.1.~~

4 25 ~~5. A person applying to be licensed as an optometrist~~
4 26 ~~after January 1, 1986, shall also apply to be a~~
4 27 ~~therapeutically certified optometrist and shall, in addition~~
4 28 ~~to satisfactorily completing all requirements for a license to~~
4 29 ~~practice optometry, satisfactorily complete a course as~~
4 30 ~~defined by rule of the state board of optometry examiners with~~
4 31 ~~particular emphasis on the examination, diagnosis and~~
4 32 ~~treatment of conditions of the human eye and adnexa provided~~
4 33 ~~by an institution accredited by a regional or professional~~
4 34 ~~accreditation organization which is recognized or approved by~~
4 35 ~~the council on postsecondary accreditation of the United~~
5 1 ~~States office of education, and approved by the board of~~
5 2 ~~optometry examiners. The rule of the board shall require a~~
5 3 ~~course including a minimum of forty hours of didactic~~
5 4 ~~education and sixty hours of approved supervised clinical~~
5 5 ~~training in the examination, diagnosis and treatment of~~
5 6 ~~conditions of the human eye and adnexa. The board may also,~~
5 7 ~~by rule, provide a procedure by which an applicant who has~~
5 8 ~~received didactic education meeting the requirements of rules~~
5 9 ~~adopted pursuant to this subsection at an approved school of~~
5 10 ~~optometry may apply to the board for a waiver of the didactic~~
5 11 ~~education requirements of this subsection.~~

5 12 ~~6. A person licensed in any state as an optometrist prior~~
5 13 ~~to January 1, 1986, who applies to be a therapeutically~~
5 14 ~~certified optometrist shall first satisfactorily complete a~~

~~5 15 course as defined by rule of the board of optometry examiners~~
~~5 16 with particular emphasis on the examination, diagnosis and~~
~~5 17 treatment of conditions of the human eye and adnexa provided~~
~~5 18 by an institution accredited by a regional or professional~~
~~5 19 accreditation organization which is recognized or approved by~~
~~5 20 the council on postsecondary accreditation of the United~~
~~5 21 States office of education, and approved by the board of~~
~~5 22 optometry examiners. The rule of the board shall require a~~
~~5 23 course including a minimum of forty hours of didactic~~
~~5 24 education and sixty hours of approved supervised clinical~~
~~5 25 training in the examination, diagnosis, and treatment of~~
~~5 26 conditions of the human eye and adnexa. Effective July 1,~~
~~5 27 1987, the board shall require that therapeutically certified~~
~~5 28 optometrists prior to the utilization of topical and oral~~
~~5 29 antiglaucoma agents, oral antimicrobial agents and oral~~
~~5 30 analgesic agents shall complete an additional forty-four hours~~
~~5 31 of education with emphasis on treatment and management of~~
~~5 32 glaucoma and use of oral pharmaceutical agents for treatment~~
~~5 33 and management of ocular diseases, provided by an institution~~
~~5 34 accredited by a regional or professional accreditation~~
~~5 35 organization which is recognized or approved by the council on~~
~~6 1 postsecondary accreditation of the United States office of~~
~~6 2 education, and approved by the board of optometry examiners.~~
~~6 3 Upon completion of the additional forty-four hours of~~
~~6 4 education, a therapeutically certified optometrist shall also~~
~~6 5 pass an oral or written examination prescribed by the board.~~
~~6 6 The board shall suspend the optometrist's therapeutic~~
~~6 7 certificate for failure to comply with this subsection by July~~
~~6 8 1, 1988.~~

6 9 The board shall adopt rules requiring an additional twenty
~~6 10 hours per biennium of continuing education in the treatment~~
~~6 11 and management of ocular disease for all therapeutically~~
~~6 12 certified optometrists. The department of ophthalmology of~~
~~6 13 the school of medicine of the state university of Iowa shall~~
~~6 14 be one of the providers of this continuing education.~~

6 15 7. A person licensed in any state as an optometrist prior
~~6 16 to January 1, 1986, who applies to be a therapeutically~~
~~6 17 certified optometrist shall also be required to qualify as a~~
~~6 18 certified licensed optometrist as defined in subsections 2, 3,~~
~~6 19 and 4.~~

6 20 8. In addition to the examination required by subsection
~~6 21 1, paragraph "c", a person applying to be a therapeutically~~
~~6 22 certified optometrist shall also pass an examination~~
~~6 23 prescribed by the board of optometry examiners in the~~
~~6 24 examination, diagnosis, and treatment of diseases of the human~~
~~6 25 eye and adnexa.~~

6 26 Sec. 3. Section 154.10, Code 2007, is amended to read as
6 27 follows:

6 28 154.10 STANDARD OF CARE.

6 29 1. A diagnostically certified licensed optometrist
6 30 employing diagnostic pharmaceutical agents as authorized by
6 31 section 154.1 shall be held to the same standard of care in
6 32 the use of such agents and in diagnosis as is common to
6 33 persons licensed under chapter 148, 150, or 150A in this
6 34 state.

6 35 2. A therapeutically certified optometrist employing
7 1 pharmaceutical agents as authorized by section 154.1 shall be
7 2 held to the same standard of care in the use of such agents
7 3 and in diagnosis and treatment as is common to persons
7 4 licensed under chapter 148, 150, or 150A in this state.

7 5 Sec. 4. Sections 154.4, 154.5, 154.6, and 154.7, Code
7 6 2007, are repealed.

7 7 DIVISION II
7 8 MORTUARY SCIENCE

7 9 Sec. 5. Section 156.1, subsection 6, Code 2007, is amended
7 10 to read as follows:

7 11 6. "Intern" means a person registered by the board to
7 12 practice mortuary science under the direct supervision of a
7 13 ~~funeral director~~ preceptor certified by the board.

7 14 Sec. 6. Section 156.1, subsection 7, paragraph d, Code
7 15 2007, is amended to read as follows:

7 16 d. ~~Embalming by disinfecting or preserving~~ dead human
7 17 bodies, entire or in part, by the use of chemical substances,
7 18 fluids, or gases in the body, or by the introduction of the
7 19 same into the body by vascular ~~or injections~~, hypodermic
7 20 injections, or by direct surface application into the organs
7 21 or cavities for the purpose of preservation or disinfection.

7 22 Sec. 7. Section 156.4, subsections 1 and 3, Code 2007, are
7 23 amended to read as follows:

7 24 1. The practice of a funeral director must be conducted
7 25 from a funeral establishment licensed by the board. The board

7 26 may specify criteria for exceptions to the requirement of this
7 27 subsection in rules.

7 28 3. Applications for the examination for a funeral
7 29 director's license shall be ~~in writing and~~ verified on a form
7 30 furnished by the board.

7 31 Sec. 8. Section 156.8A, Code 2007, is amended to read as
7 32 follows:

7 33 156.8A STUDENT PRACTICUM.

7 34 The board, by rule, shall provide for practicums in
7 35 mortuary science for students available through any school
8 1 accredited by the American board of funeral service education
8 2 ~~and shall regulate the registration, training, and fees for~~
8 3 ~~such practicums.~~

8 4 Sec. 9. Section 156.9, subsection 2, Code 2007, is amended
8 5 to read as follows:

8 6 2. In addition to the grounds stated in sections 147.55
8 7 and 272C.10, the board may revoke or suspend the license of,
8 8 ~~or otherwise discipline,~~ a funeral director for any one of the
8 9 following acts:

8 10 a. Knowingly misrepresenting any material matter to a
8 11 prospective purchaser of funeral merchandise, furnishings, or
8 12 services.

8 13 ~~b. Executing a death certificate or burial transit permit~~
8 14 ~~for use by anyone except a funeral director or a certified~~
8 15 ~~intern who is working under the direct supervision of a~~
8 16 ~~funeral director unless otherwise allowed under section~~
8 17 ~~144.32. A violation of chapter 144 related to the practice of~~
8 18 ~~mortuary science.~~

8 19 c. Knowingly aiding, assisting, procuring, advising, or
8 20 allowing a person to unlawfully practice mortuary science.

8 21 d. Willful or repeated violations of this chapter, or the
8 22 rules adopted pursuant to this chapter.

8 23 ~~e. Conviction of any crime related to the practice of~~
8 24 ~~mortuary science or implicating the licensee's competence to~~
8 25 ~~safely perform mortuary science services, including but not~~
8 26 ~~limited to a crime involving moral character, dishonesty,~~
8 27 ~~fraud, theft, embezzlement, extortion, or controlled~~
8 28 ~~substances, in a court of competent jurisdiction in this~~
8 29 ~~state, or in another state, territory, or district of the~~
8 30 ~~United States, or in a foreign jurisdiction. For purposes of~~
8 31 ~~this paragraph, "conviction" includes a guilty plea, deferred~~
8 32 ~~judgment, or other finding of guilt. A certified copy of the~~
8 33 ~~judgment is prima facie evidence of the conviction.~~

8 34 Sec. 10. Section 156.10, Code 2007, is amended to read as
8 35 follows:

9 1 156.10 INSPECTION.

9 2 1. The director of public health shall inspect all places
9 3 where dead human bodies are prepared or held for burial,
9 4 entombment, or cremation, and shall adopt and enforce such
9 5 rules and regulations in connection with the inspection as
9 6 shall be necessary for the preservation of the public health.

9 7 2. ~~An~~ The Iowa department of public health shall assess an
9 8 inspection fee for ~~each an inspection of a place where dead~~
9 9 ~~human bodies are prepared for burial or cremation shall be~~
9 10 ~~fifteen dollars per year, which shall be collected by the~~
9 11 ~~director of public health. The fee shall be determined by the~~
9 12 ~~department by rule.~~

9 13 Sec. 11. Section 156.15, subsection 2, paragraph a, Code
9 14 2007, is amended to read as follows:

9 15 a. Been convicted of a felony or ~~a misdemeanor involving~~
9 16 ~~moral turpitude any crime related to the practice of mortuary~~
9 17 ~~science or implicating the establishment's ability to safely~~
9 18 ~~perform mortuary science services,~~ or if the applicant is an
9 19 association, joint stock company, partnership, or corporation,
9 20 that a managing officer ~~or owner~~ has been convicted of ~~a~~
9 21 ~~felony or a misdemeanor involving moral turpitude such a~~
9 22 ~~crime,~~ under the laws of this state, another state, or the
9 23 United States.

9 24 Sec. 12. Section 156.13, Code 2007, is repealed.

9 25 DIVISION III

9 26 STATE PUBLIC HEALTH DENTAL DIRECTOR AND ORAL

9 27 HEALTH BUREAU ESTABLISHED

9 28 Sec. 13. NEW SECTION. 135.14 STATE PUBLIC HEALTH DENTAL
9 29 DIRECTOR == DUTIES.

9 30 1. The position of state public health dental director is
9 31 established within the department.

9 32 2. The dental director shall perform all of the following
9 33 duties:

9 34 a. Plan and direct all work activities of the statewide
9 35 public health dental program.

10 1 b. Develop comprehensive dental initiatives for prevention

2 activities.
3 c. Evaluate the effectiveness of the statewide public
4 health dental program and of program personnel.
5 d. Manage the oral health bureau including direction,
6 supervision, and fiscal management of bureau staff.
7 e. Other related work as required.
8 Sec. 14. NEW SECTION. 135.15 ORAL HEALTH BUREAU
9 ESTABLISHED == RESPONSIBILITIES.
10 An oral health bureau is established within the division of
11 health promotion and chronic disease prevention of the
12 department. The bureau shall be responsible for all of the
13 following:
14 1. Providing population-based oral health services,
15 including public health training, improvement of dental
16 support systems for families, technical assistance,
17 awareness-building activities, and educational services, at
18 the state and local level to assist Iowans in maintaining
19 optimal oral health throughout all stages of life.
20 2. Performing infrastructure building and enabling
21 services through the administration of state and federal grant
22 programs targeting access improvement, prevention, and local
23 oral health programs utilizing maternal and child health
24 programs, Medicaid, and other new or existing programs.
25 3. Leveraging federal, state, and local resources for
26 programs under the purview of the bureau.
27 4. Facilitating ongoing strategic planning and application
28 of evidence-based research in oral health care policy
29 development that improves oral health care access and the
30 overall oral health of all Iowans.
31 5. Developing and implementing an ongoing oral health
32 surveillance system for the evaluation and monitoring of the
33 oral health status of children and other underserved
34 populations.

DIVISION IV

DEPENDENT ADULT ABUSE

1 Sec. 15. Section 235B.3, subsection 1, Code 2007, is
2 amended to read as follows:
3 1. a. The department shall receive dependent adult abuse
4 reports and shall collect, maintain, and disseminate the
5 reports by establishing a central registry for dependent adult
6 abuse information. The department shall evaluate the reports
7 expeditiously. However, the department of inspections and
8 appeals is solely responsible for the evaluation and
9 disposition of dependent adult abuse cases within health care
10 facilities and shall inform the department of human services
11 of such evaluations and dispositions.
12 b. Reports of dependent adult abuse which is the result of
13 the acts or omissions of the dependent adult shall be
14 collected and maintained in the files of the dependent adult
15 as assessments only and shall not be included in the central
16 registry.
17 c. A report of dependent adult abuse that meets the
18 definition of dependent adult abuse under section 235B.2,
19 subsection 5, paragraph "a", subparagraph (1), subparagraph
20 subdivision (a) or (d), which the department determines is
21 minor, isolated, and unlikely to reoccur shall be collected
22 and maintained by the department as an assessment only for a
23 five-year period and shall not be included in the central
24 registry and shall not be considered to be founded dependent
25 adult abuse. However, a subsequent report of dependent adult
26 abuse that meets the definition of dependent adult abuse under
27 section 235B.2, subsection 5, paragraph "a", subparagraph (1),
28 subparagraph subdivision (a) or (d), that occurs within the
29 five-year period and that is committed by the caretaker
30 responsible for the act or omission which was the subject of
31 the previous report of dependent adult abuse which the
32 department determined was minor, isolated, and unlikely to
33 reoccur shall not be considered minor, isolated, and unlikely
34 to reoccur.

1 Sec. 16. Section 235B.9, Code 2007, is amended by adding
2 the following new subsection:
3 NEW SUBSECTION. 5. Dependent adult abuse information
4 which is determined to be minor, isolated, and unlikely to
5 reoccur shall be expunged five years after the receipt of the
6 initial report by the department. If a subsequent report of
7 dependent adult abuse committed by the caretaker responsible
8 for the act or omission which was the subject of the previous
9 report of dependent adult abuse which the department
10 determined was minor, isolated, and unlikely to reoccur is
11 received by the department within the five-year period, the
12 information shall be sealed ten years after receipt of the

12 13 subsequent report unless good cause can be shown why the
12 14 information should remain open to authorized access.

12 15 DIVISION V

12 16 MISCELLANEOUS PROVISIONS

12 17 Sec. 17. Section 135.11, Code 2007, is amended by adding
12 18 the following new subsection:

12 19 NEW SUBSECTION. 31. In consultation with the advisory
12 20 committee for perinatal guidelines, develop and maintain the
12 21 statewide perinatal program based on the recommendations of
12 22 the American academy of pediatrics and the American college of
12 23 obstetricians and gynecologists contained in the most recent
12 24 edition of the guidelines for perinatal care, and shall adopt
12 25 rules in accordance with chapter 17A to implement those
12 26 recommendations. Hospitals within the state shall determine
12 27 whether to participate in the statewide perinatal program, and
12 28 select the hospital's level of participation in the program.
12 29 A hospital having determined to participate in the program
12 30 shall comply with the guidelines appropriate to the level of
12 31 participation selected by the hospital.

12 32 Sec. 18. Section 135.24, subsection 5, paragraph a, Code
12 33 2007, is amended to read as follows:

12 34 a. "Charitable organization" means a charitable
12 35 organization within the meaning of section 501(c)(3) of the
13 1 Internal Revenue Code ~~which has as its primary purpose the~~
~~13 2 sponsorship or support of programs designed to improve the~~
~~13 3 quality, awareness, and availability of chiropractic, dental,~~
~~13 4 medical, pharmaceutical, nursing, optometric, psychological,~~
~~13 5 social work, behavioral science, podiatric, physical therapy,~~
~~13 6 occupational therapy, respiratory therapy, or emergency~~
~~13 7 medical care services to children and to serve as a funding~~
~~13 8 mechanism for provision of chiropractic, dental, medical,~~
~~13 9 pharmaceutical, nursing, optometric, psychological, social~~
~~13 10 work, behavioral science, podiatric, physical therapy,~~
~~13 11 occupational therapy, respiratory therapy, or emergency~~
~~13 12 medical care services, including but not limited to~~
~~13 13 immunizations, to children in this state.~~

13 14 Sec. 19. Section 135.43, subsection 2, unnumbered
13 15 paragraph 1, Code 2007, is amended to read as follows:

13 16 The membership of the review team is subject to the
13 17 provisions of sections 69.16 and 69.16A, relating to political
13 18 affiliation and gender balance. Review team members who are
13 19 not designated by another appointing authority shall be
13 20 appointed by the director of public health ~~in consultation~~
~~13 21 with the director of human services.~~ Membership terms shall
13 22 be for three years. A membership vacancy shall be filled in
13 23 the same manner as the original appointment. The review team
13 24 shall elect a chairperson and other officers as deemed
13 25 necessary by the review team. The review team shall meet upon
13 26 the call of the chairperson, upon the request of a state
13 27 agency, or as determined by the review team. The members of
13 28 the team are eligible for reimbursement of actual and
13 29 necessary expenses incurred in the performance of their
13 30 official duties.

13 31 Sec. 20. Section 135.43, subsection 5, Code 2007, is
13 32 amended to read as follows:

13 33 5. a. The following individuals shall designate a liaison
13 34 to assist the review team in fulfilling its responsibilities:

13 35 ~~a. (1) The director of public health.~~
14 1 ~~b. (2) The director of human services.~~
14 2 ~~c. (3) The commissioner of public safety.~~
14 3 ~~d. The administrator of the bureau of vital records of the~~
~~14 4 Iowa department of public health.~~

14 5 ~~e. (4) The attorney general.~~
14 6 ~~f. (5) The director of transportation.~~
14 7 ~~g. (6) The director of the department of education.~~

14 8 b. In addition, the chairperson of the review team shall
14 9 designate a liaison from the public at large to assist the
14 10 review team in fulfilling its responsibilities.

14 11 Sec. 21. NEW SECTION. 135.147 IMMUNITY FOR EMERGENCY AID
14 12 == EXCEPTIONS.

14 13 1. A person, corporation, or other legal entity, or an
14 14 employee or agent of such person, corporation, or entity, who,
14 15 during a public health disaster, in good faith and at the
14 16 request of or under the direction of the department or the
14 17 department of public defense renders emergency care or
14 18 assistance to a victim of the public health disaster shall not
14 19 be liable for civil damages for causing the death of or injury
14 20 to a person, or for damage to property, unless such acts or
14 21 omissions constitute recklessness.

14 22 2. The immunities provided in this section shall not apply
14 23 to any person, corporation, or other legal entity, or an

14 24 employee or agent of such person, corporation, or entity,
14 25 whose act or omission caused in whole or in part the public
14 26 health disaster and who would otherwise be liable therefor.

14 27 Sec. 22. Section 135I.4, subsection 5, Code 2007, is
14 28 amended to read as follows:

14 29 5. Adopt rules in accordance with chapter 17A for the
14 30 implementation and enforcement of this chapter, and the
14 31 establishment of fees. ~~The department shall appoint an~~
~~14 32 advisory committee composed of owners, operators, local~~
~~14 33 officials, and representatives of the public to advise it in~~
~~14 34 the formulation of appropriate rules.~~

14 35 Sec. 23. Section 135I.6, Code 2007, is amended to read as
15 1 follows:

15 2 135I.6 ENFORCEMENT.

15 3 If the department or a local board of health acting
15 4 pursuant to agreement with the department determines that a
15 5 provision of this chapter or a rule adopted pursuant to this
15 6 chapter has been or is being violated, the department may
~~15 7 withhold or revoke the registration of a swimming pool or spa,~~
~~15 8 or~~ the department or the local board of health may order that
15 9 a facility or item of equipment not be used, until the
15 10 necessary corrective action has been taken. The department or
15 11 the local board of health may request the county attorney to
15 12 bring appropriate legal proceedings to enforce this chapter,
15 13 including an action to enjoin violations. The attorney
15 14 general may also institute appropriate legal proceedings at
15 15 the request of the department. This remedy is in addition to
15 16 any other legal remedy available to the department or a local
15 17 board of health.

15 18 Sec. 24. Section 135M.4, subsection 1, paragraph d, Code
15 19 2007, is amended to read as follows:

15 20 d. The prescription drug or supplies are prescribed by a
15 21 health care practitioner for use by an eligible individual and
15 22 are dispensed by a pharmacist or are dispensed to an eligible
~~15 23 individual by the prescribing health care practitioner or the~~
~~15 24 practitioner's authorized agent.~~

15 25 Sec. 25. Section 139A.13A, subsection 1, Code 2007, is
15 26 amended to read as follows:

15 27 1. An employer shall not discharge an employee, or take or
15 28 fail to take action regarding an employee's promotion or
15 29 proposed promotion, or take action to reduce an employee's
15 30 wages or benefits for actual time worked, due to the
15 31 compliance of an employee with a quarantine or isolation order
15 32 or voluntary confinement request issued by the department, or
~~15 33 a local board, or the centers for disease control and~~
~~15 34 prevention of the United States department of health and human~~
~~15 35 services.~~

16 1 Sec. 26. Section 144.28, subsection 1, Code 2007, is
16 2 amended to read as follows:

16 3 1. The medical certification shall be completed and signed
16 4 by the physician in charge of the patient's care for the
16 5 illness or condition which resulted in death within
16 6 seventy-two hours after receipt of the death certificate from
16 7 the funeral director or individual who initially assumes
16 8 custody of the body, except when inquiry is required by the
16 9 county medical examiner. If upon inquiry into the death, the
~~16 10 county medical examiner determines that a preexisting natural~~
~~16 11 disease or condition was the likely cause of death and that~~
~~16 12 the death does not affect the public interest as described in~~
~~16 13 section 331.802, subsection 3, the county medical examiner may~~
~~16 14 elect to defer to the physician in charge of the patient's~~
~~16 15 preexisting condition the certification of the cause of death.~~

16 16 When inquiry is required by the county medical examiner, the
16 17 medical examiner shall investigate the cause of death and
16 18 shall complete and sign the medical certification within
16 19 seventy-two hours after determination of the cause of death.

16 20 Sec. 27. Section 144.46, Code 2007, is amended to read as
16 21 follows:

16 22 144.46 FEE FOR COPY OF RECORD FEES.

16 23 1. The department by rule shall establish fees based on
16 24 the average administrative cost which shall be collected by
16 25 the state registrar or the county registrar for each of the
16 26 following:

16 27 a. A certified copy or short form certification of
~~16 28 certificates or records, or for a certificate or record.~~
16 29 b. A search of the files or records when no copy is made,
16 30 or when no record is found on file.
16 31 c. A copy of a certificate or record or a vital statistics
~~16 32 data file provided to a researcher in accordance with section~~
~~16 33 144.44.~~

16 34 d. A copy of a certificate or record or a vital statistics

16 35 data file provided to a federal, state, local, or other public
17 1 or private agency for statistical purposes in accordance with
17 2 section 144.45.

17 3 e. Verification or certification of vital statistics data
17 4 provided to a federal, state, or local governmental agency
17 5 authorized by rule to receive such data.

17 6 2. Fees collected by the state registrar and by the county
17 7 registrar on behalf of the state under this section shall be
17 8 deposited in the general fund of the state and the vital
17 9 records fund established in section 144.46A in accordance with

17 10 an apportionment established by rule. Fees collected by the
17 11 county registrar pursuant to section 331.605, subsection 6,
17 12 shall be deposited in the county general fund. ~~A fee shall~~
17 13 ~~not be collected from a political subdivision or agency of~~
17 14 ~~this state.~~

17 15 Sec. 28. Section 144.46A, subsections 2 and 3, Code 2007,
17 16 are amended to read as follows:

17 17 2. ~~The department shall adopt rules providing for an~~
17 18 ~~increase in the fees charged by the state registrar for vital~~
17 19 ~~records services under section 144.46 in an amount necessary~~
17 20 ~~to pay for the purposes designated in subsection 1.~~

17 21 3. ~~2. Increased fees collected by the state registrar~~
17 22 ~~pursuant to this section shall be credited to the vital~~
17 23 ~~records fund.~~ Moneys credited to the fund pursuant to section
17 24 144.46 and otherwise are appropriated to the department to be

17 25 used for the purposes designated in subsection 1.
17 26 Notwithstanding section 8.33, moneys credited to the fund that
17 27 remain unencumbered or unobligated at the close of the fiscal
17 28 year shall not revert to any fund but shall remain available
17 29 for expenditure for the purposes designated.

17 30 Sec. 29. Section 152.1, subsection 4, paragraph c, Code
17 31 2007, is amended to read as follows:

17 32 c. Make the pronouncement of death for a patient whose
17 33 death is anticipated if the death occurs in a licensed
17 34 hospital, a licensed health care facility, a
17 35 Medicare=certified home health agency, ~~or~~ a Medicare=certified
18 1 hospice program or facility, or an assisted living facility or
18 2 residential care facility, with notice of the death to a
18 3 physician and in accordance with any directions of a
18 4 physician.

18 5 Sec. 30. Section 152.1, subsection 6, paragraph e, Code
18 6 2007, is amended to read as follows:

18 7 e. Make the pronouncement of death for a patient whose
18 8 death is anticipated if the death occurs in a licensed
18 9 hospital, a licensed health care facility, a
18 10 Medicare=certified home health agency, ~~or~~ a Medicare=certified
18 11 hospice program or facility, an assisted living facility, or a
18 12 residential care facility, with notice of the death to a
18 13 physician and in accordance with any directions of a
18 14 physician.

18 15
18 16
18 17
18 18 _____
18 19 PATRICK J. MURPHY
18 20 Speaker of the House

18 21
18 22
18 23 _____
18 24 JOHN P. KIBBIE
18 25 President of the Senate

18 26
18 27
18 28
18 29
18 30
18 31 _____
18 32 MARK BRANDSGARD
18 33 Chief Clerk of the House

18 34 Approved _____, 2007

18 35
19 1
19 2 _____
19 3 CHESTER J. CULVER
19 4 Governor